Common use repensors Reduction Act of 1995, no persons are required to respond to a pollection of information unless a displays a valid OMB control number. Approved for use through 7/31/2006 CMB 0651-0032 PTO/38/06 (12:04) U.S. Potent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Substitute for Form PTO-875 Application or Docket Humber Effective December 8, 2004 APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN OR SMALL ENTITY NUMBER FILED BASIC FEE NUMBER EXTRA (37 CFR 1 16(4) (b) & (c)) RATE (\$) FEE () N/A RATE (\$ SEARCH FEE N/A FEE (1) P-I/A 150.00 137 CFR 1 10(N. H. or [m]) NA N/A 300.00 EXAMINATION FEE N/A NA \$250 (37 CFR 1 16(a). (p). or (q)) N/A N/A \$500 N/A TOTAL CLAIMS NA \$100 (37.CFR 1 16(1)) N/A \$200 minus 20 . INDEPENDENT CLAIMS X\$ 25 (37 CFR 1 16(N)) X\$50 ĆΩ. minus 3 X100 if the specification and drawings exceed 100 APPLICATION SIZE X200 sheets of paper, the application size fee due FEE ... (37 CFR 1 16(4)) is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR | 16(1)) +180= the difference in column 1 is less than zero, enter "0" in column 2. +360= TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3): CLAIMS SMALL ENTITY OTHER THAN OR HIGHEST REMAINING SMALL ENTITY NUMBER PRESENT ENDMENT AFTER RATE (\$) MENDMENT PREVIOUSLY EXTRA ADDI-RATE (\$) Total PAID FOR TIONAL ADDI-**U**3 Minus FEE (S) 40 TIONAL independent D7 CFR 1, 10(h) FEE (1) X\$ 25 Minus X\$50 OR Application Size Fee (37 CFR 1.16(s)) X100 X200 **OR** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@) +180= +360= OR TOTAL TOTAL ADD'L FEE OR (Column 1) ADO'L FEE (Column 2) CLAIMS (Column 3) 8 HIGHEST REMAINING PRESENT AFTER. AMENDMENT NUMBER AMENDMENT RATE (\$) PREVIOUSLY ADDI-EXTRA Total (DTCFR,1.18(II) RATE (\$) PAID FOR TIONAL ADOI-Minus FEE (\$) TIONAL FEE (5) Independent . X\$ 25 Minus X\$50 OR Application Size Fee (37 CFR 1.16(6)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL

If the entry in column 1 is less than the entry in column 2, write "In column 3.

If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

It collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to piocess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to be builting gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

ADD'L FEE

OR

ADD'L FEE